

Practitioner's Docket No. _____

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Ming-Qun Xu
 Application No. 0 9 / 786,009 Group No.: 1652
 Filed: February 28, 2001 W. Moore
 For: Intein-Mediated Peptide
Ligation

Patent No.: _____ Issue date: _____

*NOTE Preferably also insert inventor's name and invention title.

Assistant Commissioner for Patents
 Washington, D.C. 20231

TERMINAL DISCLAIMER (37 C.F.R. § 1.137(a), (c) and § 1.321(a), (b))

IDENTIFICATION OF PERSON(S) MAKING THIS DISCLAIMER

Barriett M. Strimpel, D.Phil.
 (type or print names of all inventors or assigns or name of attorney signing disclaimer)
 represent that I am:

(a)

an inventor of this invention.
 an assignee of this invention.

WARNING: "If the patent or patent application is assigned to an organization, such as a corporation, partnership, university, Government agency or similar entity, and the disclaimer is signed by the assignee, the assignee must comply with § 3.73(b)." Notice of Oct. 15, 1993, 1156 O.G. 54-61 at 56.
 a representative authorized to sign on behalf of the assignee for this invention.

WARNING: See the above "**WARNING**".

the attorney of record for this invention.

NOTE The rules "permit an attorney or agent of record to sign a terminal disclaimer without the need to comply with § 3.73(b)." Notice of Oct. 15, 1993, 1156 O.G. 54-61, at 56.

and

(b) The extent of interest in this invention for which this disclaimer is being made
 is in:

the whole of this invention.
 a sectional interest in this invention as follows
 (here state the exact interest of disclaimant):

IDENTITY OF ASSIGNEE AND TITLE OF DISCLAIMANT*(if applicable)*

The assignee is New England Biolabs, Inc.
Name of assignee 32 Tozer Road
Address of assignee Beverly, MA 01915

Title of disclaimant authorized to sign on behalf of assignee Secretary

RECORDAL OF ASSIGNMENT IN PTO*(if applicable)*

The assignment was recorded on February 28, 2001
Reel 011618
Frame 0819

Authorization for recordal of the assignment is separately attached.
 A separate "ASSIGNMENT (DOCUMENT) COVER SHEET" or
 FORM PTO 1595 is also attached.

ESTABLISHING RIGHT OF ASSIGNEE TO TAKE ACTION*(if applicable)*

Attached is a "STATEMENT UNDER § 3.73(b)," establishing the right of the assignee to take action in this case.

DISCLAIMER**A. Patent Term (37 C.F.R. § 1.321(a) and (b))**

Disclaimer is hereby made for:

all that portion of the term of any patent to be issued on this application

or

the term of this patent
subsequent to 19

B. Claims (37 C.F.R. § 1.321(a))

Disclaimer is hereby made for the following claims of this patent:

Claims 7 and 12-27

[Terminal Disclaimer **[14-5]**—page 2 of 3]

**EXTENSION OF DISCLAIMER
TO SUBSEQUENT 35 U.S.C. § 120 APPLICATIONS**

(complete the following item, if applicable)

Because this terminal disclaimer accompanies a petition to revive:

an application filed before June 8, 1995 that is
 abandoned
 (37 C.F.R. § 1.137(a) and (c)),
 abandoned for failure to pay the issue fee
 (37 C.F.R. § 1.316(b) and (d)).
 a design application,

this disclaimer also applies to any patent granted on any continuing application entitled, under 35 U.S.C. § 120, to the benefit of the filing date of this application for which revival is sought.

FEES STATUS (37 C.F.R. § 1.20(d))
(\$110.00; fee for small entity, if applicable, \$55.00)

Attached is a check money order in the amount of \$ 55.00
 Authorization is hereby made to charge the amount of \$
 to Deposit Account No
 to Credit card as shown on the attached credit card information authorization form PTO-2038.

WARNING: Credit card information should not be included on this form as it may become public.

Charge any additional fees required by this paper or credit any overpayment in the manner authorized above.

A duplicate of this paper is attached.

Reg. No. 3,008

Tel. No. (978) 927-5054 X:373

Customer No.: 28986

Harriet M. Strimpel, D.Phil.
Signature of disclaimer
Harriet M. Strimpel, D.Phil.

Patent Counsel

SIGNATURE OF PRACTITIONER
New England Biolabs, Inc.
32 Tozer Road
(type or print name of practitioner)
Beverly, MA 01913

P.O. Address